שנים AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Co						SMALL ENTITY lumn 2) TYPE			OR	OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			41		100		ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			#/ minus 20=		* 21			X\$ 9=	189.00	OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=	80,00	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	Ð	OR	+270=	
* If the difference in column 1 is less than zero, enter "C						olumn 2	L	TOTAL	624.00	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER THAN	
(Column 1)				(Column 2)		(Column 3)		SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			NDDII. I EE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST IBER OUSLY FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDEN	I CLAIM		. [+135=		OR	+270=	
							L	TOTAL		OR	TOTAL	
		(Oaluman d)		(Calu		(Column 2)		ADDIT. FEE		j	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	mn 2) HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
	Independent	*	Minus	***	T C) A!!4	=	┧┞	X40=		OR	X80=	
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE	
***	'If the "Highest Nu The "Highest Nun	mber Previously Pa ber Previously Pa	aid For" IN THI id For" (Total or	S SPACE Independ	is less tha dent) is the	an 3, enter "3." e highest numb		DDIT. FEE L	propriate box	· « in co		